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No. 0639 P. 1

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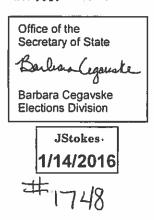


Secretary of State
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Website: www.nvsos.gov

## State of Nevada Committee for Political Action (PAC)

Registration Form

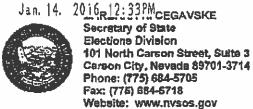


ABOVE SPACE IS FOR OFFICE USE ONLY New Registration PAC (Advocating Passage or Defeat of a Ballot Question) Annual (Due on or before January 15th of each year, NRS 294A.230(4)(b)) Amended Registration: Change Officers Change Registered Agent Change Address check all that apply Change Name Previous Name of PAC Other: Name of Committee: Telephone: Friends For Harry Reid Mailing Address: 700 13th Street NW, Suite 600 Washington DC 20005 Street Name, Number City Zip Code PAC Active Email Address: |PLGroup@perkinscoie.com PURPOSE: Briefly state the purpose for which the PAC was organized. To provide support for Democratic Candidates. REGISTERED AGENT: pursuant to NRS 294A.240, each PAC must appoint and keep in the State a registered agent, as provided in NRS 14.020, who must be a natural person who resides in the State of Nevada. Name of Registered Agent: Telephone: Chris Anderson 2025445632 Physical Address: 5223 Caspian Springs Drive, Unit 2014 Las Vegas 89120 Street Name, Number Stets Zip Code REGISTERED AGENT ACCEPTANCE: I hereby accept appointment as Registered Agent for the above-named Committee for Political Action. Date: 70:5 1/eqSignature of Registered Agent

EL408 Revised: 11-5-15

Date: 1/14/2016 9:58:27 AM

State of No. 0639 - P. 2-



## **Committee for Political Action** (PAC) Registration Form Page 2

necessary).	udress and relephone number of e	each officer (attach additional pages it
Officer Name and Title:		Telephone:
Chris Anderson, Treasurer Mailing Address:		2025445632
700 13th Street, NW Suite 600 Street Name, Number	Washington	DC 20005
Officer Name and Title:	City	State Zip Code Telephone;
Mailing Address:		
Street Name, Number	1	State Zip Code
Officer Name and Title:	City	Telephone:
Mailing Address:		
Street Name, Number	City	State Zip Code
Officer Name and Title:	Wilg	Telephone:
Mailing Address:		
Street Name, Number	City	State Zp Code
of each organization (please attach Name of Organization:	additional pages if necessary).	list the name, address and telephone nu  Telephone:
Mailing Address:		
Street Name, Number	City	State Zip Code
Name of Organization:	Olly	Telephone:
Mailing Address:		*
treet Name, Number	City	State Zio Code
Name of Organization:		Telephone;
Mailing Address:		1
breet Name, Number	City	State Zip Code
SUBMITTED BY:		•
XCi C	Printed Name: Chris Anderson	Date: Telephone;
ignature of Representative of Group	Cours Anderson	1/15/2016 2025445632